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STATE OF SOUTH DAKOTA

NOV 2 7 2017

Statement of Legal Newspaper Ownership and Circulation S.D. SEC. OF STATE

1. TITLE OF NEWSPAPER The	CANISTOTA C	lipper	2. DATE 9-30-17
3. FREQUENCY OF ISSUE	3A. NO. OF ISSUES PUBL	PRICE	NNUAL SUBSCRIPTION S 32.00 38.00
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) See Selow			
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) POBOX 128 CANISTOTA SO 570/2			
6. FULL NAME OF PUBLISHER: Matt Anderta			
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. COMPLETE MAILING ADDRESS.			
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1570/2 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.			
NONE			
9. EXTENT AND NATURE OF CIRCULATION		AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)		550	500
B.PAID AND/OR REQUESTED CIRCULATION Sales through dealers and carriers, street vendors, and counter sales.		75	75
Mail Subscription (Paid and or requested)		388	377
3. Paid Electronic Copies		_	
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)		463	452
D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS			
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES			
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)			
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing		87	48
2. Return from News Agents			
G.TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)		550	500
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public I swear that the statements made by me are true, correct, and complete: Complete			
NOTAKSeal) *		wy commission expires:	1.0100

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32.00/32:00

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Matt & Fusan Anderl 223 N. 7th Ave CANIStota SD 57012

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